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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	J&J-2068
	First Named Inventor	Nikiforos Kollias
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/008,753
	Filing Date	November 8, 2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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METHOD OF TAKING IMAGES OF THE SKIN USING BLUE LIGHT AND THE USE THEREOF  
(Title of the Invention)

OFFICE OF PETITIONS

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **11/08/2001** as United States Application Number or PCT International Application Number **10/008,753** and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

### DECLARATION - Utility or Design Patent Application

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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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AND

☐ Practitioner(s) named below:  
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Direct all correspondence to: Customer Number  
☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Nikiforos

Family Name  
or Surname Kollias

Inventor's  
Signature

Date May 10, 2004

Residence: City Skillman

State NJ

Country USA

Citizenship USA

Mailing Address 406 Sunset Road

City Skillman

State NJ

ZIP 08558

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Kenneth

Family Name  
or Surname Merola

Inventor's  
Signature

Date

Residence: City Agoura Hills

State CA

Country USA

Citizenship USA

Mailing Address 6334 Aquarius Avenue

City Agoura Hills

State Ca

ZIP 91301

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Jeffrey S.

Family Name  
or Surname Pote

Inventor's  
Signature

Date

Residence: City Easton

State PA

Country USA

Citizenship USA

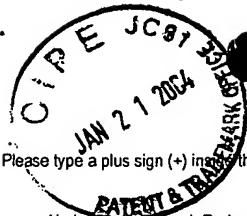
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City Easton

State PA

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☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Nikiforos

Family Name  
or Surname Kollias

Inventor's  
Signature

Date

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State NJ

Country USA

Citizenship USA

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City Skillman

State NJ

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Kenneth

Family Name  
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Inventor's  
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Date

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NAME OF THIRD INVENTOR:

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☐ A petition has been filed for this unsigned inventor

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Family Name  
or Surname Kollias

Inventor's  
Signature

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NAME OF SECOND INVENTOR:

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or Surname Merola

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NAME OF THIRD INVENTOR:

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Given Name  
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Inventor's  
Signature

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any)) Gregory

Family Name  
or Surname Payonk

Inventor's  
Signature

Date

Residence: City Flanders

State NJ

Country USA

Citizenship USA

Mailing Address 41 Kevin Drive

City Flanders

State NJ

ZIP 07836

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any))

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle (if any))

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

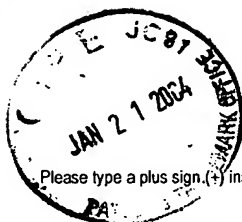
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☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Gregory

Family Name  
or Surname Payonk

Inventor's  
Signature

*Gregory S Payonk*

Date

5-10-2002

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State NJ

Country USA

Citizenship USA

Mailing Address 41 Kevin Drive

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State NJ

ZIP 07836

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or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country